## FORM D

#### UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

SEC Mail Processing Section

Washington, D.C. 20549

# FORM D

APR 09 2008

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D,

Washington, DC 110

**SECTION 4(6), AND/OR** 

UNIFORM LIMITED OFFERING EXEMPTION

14324	118
OMB AF	PROVAL
OMB Number: Expires:	3235-0076 April 30, 2008
Estimated average l	
SEC US	E ONLY
Prefix	Serial
DATE R	ECEIVED
1	

Name of Offering ( check if this is an amendment and na	ne has changed, and indic	ate change.)							
Offer and Sale of Series A Preferred Stock									
Filing Under (Check box(es) that apply):  Rule 504	☐ Rule 505	□ Rule 506	Section 4(6)	☐ ULOE					
Type of Filing: New Filing Amendme	ent								
	A. BASIC IDENTIF	ICATION DATA							
Enter the information requested about the issuer.									
Name of Issuer ( check if this is an amendment and name	_	L 166754 9919L 16754 9914L 61675 1994 11664 19844 6911 1684							
Head To Head, Inc.				1 16844 96001 1884 9800 1884 1890 1884 1890 1884 1890					
Address of Executive Offices	(Number and Street	, City, State, Zip Code)	Telephone Numb	]					
10 Kathryn Road, Foxborough, MA 02035	508-507-1759	08047180							
Address of Principal Business Operations (if different from Executive Offices)	Telephone Number	r (including Area Code)							
Brief Description of Business			1	BDOOFOOFD					
Casual online sports				PROCESSED					
Type of Business Organization				ADD 1 0 2000					
□ Corporation  □ limited part	nership, already formed	other	r (please specify):	APR 1 8 2008					
☐ business trust ☐ limited part	nership, to be formed			THOMSON					
Actual or Estimated Date of Incorporation or Organization:	Month 0 2	<del></del>		Estimated FINANCIAL					
	er two-letter U.S. Postal S			1					
CN for Canada; FN for other foreign jurisdiction)  D E									

### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File. U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

1					
		A. BASIC IDENTI	FICATION DATA		
<ul> <li>Each beneficial owner</li> </ul>	issuer, if the issuer h r having the power to r and director of corp	as been organized within the pa to vote or dispose, or direct the v porate issuers and of corporate g	ote or disposition of, 10% or r		-
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre c/o Head To Head, Inc., 10	•				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number and Si	treet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number and St	treet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and St	reet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, in	f individual)				
Business or Residence Addre	ss (Number and St	reet, City, State, Zip Code)			

Check Box(es) that Apply:

Check Box(es) that Apply:

Full Name (Last name first, if individual)

Full Name (Last name first, if individual)

☐ Promoter

Business or Residence Address (Number and Street, City, State, Zip Code)

☐ Promoter

Business or Residence Address (Number and Street, City, State, Zip Code)

■ Beneficial Owner

☐ Beneficial Owner

■ Executive Officer

□ Executive Officer

☐ Director

☐ Director

☐ General and/or Managing Partner

☐ General and/or

Managing Partner

				B. II	NFORMA"	TION ABO	UT OFFE	RING				
											Yes	N
l. Ha	as the issuer sol	d, or does th	e issuer inte		to non-accr wer also in A			_		•••••		Ø
2. W	hat is the minin	num investm	ent that wil	l be accept	ed from any	y individual	?	······································			-	N/A
, r	ana 4b CC - 1			-C ·							Yes	N
	oes the offering			-								×
co: ofi wi	nter the information on significant of significant of state or states of such a	imilar remu son to be list ites, list the	neration fo ted is an ass name of th	or solicitati sociated pe e broker oi	on of purcerson or ager or dealer. If	hasers in on the of a broken in the of a broken in the of a broken in the of th	connection er or dealer five (5) per	with sales r registered rsons to be	of securiti with the SF listed are a	es in the EC and/or	1	N/A
Full Na	ame (Last name	first, if indiv	vidual)									
Busines	ss or Residence	Address (No	umber and S	Street, City	, State, Zip	Code)						
Name o	of Associated Br	roker or Dea	ler								<del></del>	
	n Which Person							<u> </u>	<u> </u>			
(Check [AL	"All States" or [AK]	check indivi [AZ]	iduals State [AR]	s). [CA]	All Stat [CO]	tes [CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]		[IA]	(KS)	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
 [M]		[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	me (Last name	first, if indiv	/idual)									
				34m-11 CT	C+	O- 1 \						
Busines	ss or Residence	Address (Ni	umber and !	street, City	, State, Zip	Code)						
Name o	of Associated Br	roker or Dea	ler		_							_
	n Which Person											<u> </u>
(Check [AL	"All States" or [AK]	check indivi [AZ]	iduals State [AR]	s) [CA]	All Stat [CO]	tes [CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[iD]
· [IL]		[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M]		[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	me (Last name	first, if indiv	ridual)									
Full Na	ame (Last name			Street, City	, State, Zip	Code)				· · · · · · · · · · · · · · · · · · ·		
Full Na		Address (Nu	umber and S	Street, City	, State, Zip	Code)						
Full Na Busines Name o	ss or Residence of Associated Br	Address (Nuroker or Dea	umber and S	r Intends to	Solicit Pur	chasers						
Full Na Busines Name o	of Associated Br n Which Person "All States" or	Address (Nuroker or Dea	umber and S	r Intends to		chasers	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]
Full Na Busines Name o States ir (Check	of Associated Bron Which Person "All States" or	Address (Nuroker or Dea	umber and S ler Solicited or iduals State	r Intends to	Solicit Puro	chasers	[DE]	[DC]	[FL]	[GA] [MN]	[HI] [MS]	[ID]
Full Na Busines Name o States in (Check [AL	of Associated Brown Which Person "All States" or L] [AK]	Address (Nuroker or Dea Listed Has check indivi	umber and S ler Solicited or iduals State: [AR]	r Intends to s) [CA]	Solicit Pure All Stat [CO]	chasers tes [CT]						

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity		\$ 5,000,000.00
	☐ Common ☐ Preferred	<u> </u>	3,000,000.00
		s	c
	Partnership Interests.	\$	
	Other (Specify)		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.	\$	\$
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregato
		Number Investors	Aggregate Dollar Amount of Purchase
	Accredited Investors	2	\$ _5,000,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	0	\$0.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	f	<b>7</b> . 11. 4
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	2002111,	\$
	Regulation A		\$
	Rule 504		\$
	Total		\$ 0.00
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	,	
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	$\boxtimes$	\$ 75,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	⊠	\$75,000.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PKU	CEEDS		
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 an total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gros proceeds to the issuer."	s		\$_	4,925,000.00
	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the both to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.	ĸ			
			ayments to Officers, directors, & Affiliates	1	Payments to Others
	Salaries and fees		0.00		\$0.00
	Purchase of real estate		0.00		\$
	Purchase, rental or leasing and installation of machinery and equipment		0.00		\$0.00
	Construction or leasing of plant buildings and facilities		0.00		\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		0.00		\$0.00
	Repayment of indebtedness		0.00		\$0.00
	Working capital		0.00	$\boxtimes$	\$_4,925,000.00
	Other (specify):		0.00		\$0.00
olı	umn Totals		0.00	$\boxtimes$	\$ 4,925,000.00

Total Payments Listed (column totals added).....

**⊠** \$\_

4,925,000.00

	F								

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date , /
Head To Head, Inc.	Offer Old	4/7/08
Name of Signer (Print or Type)	Little of Signer (Print) or Type	
Jeffrey Anderson	President	

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18. U.S.C. 1001.)

